

Application for Certification as an Eligible Energy Resource Under the Delaware Renewable Energy Portfolio Standard

 Name of Facility 			
Beck, Michael Residence -	M Beck		
2. Facility Address			
30209 Mariners Lane			
Ocean View, DE 19970			
Is the facility located within	the PJM control area?	☑ Yes	□ No
If No, does the Facility have		□ Yes	□ No
,,			
3. Name of Owner			
Michael Beck			
Mailing Address			
30209 Mariners Lane			
Ocean View, DE 19970			
Phone 302 829 8270	Fax		
Email mecbeckm@gmail.com	m		
4. Name of Operator			
same as owner			
Mailing Address			
Dlana	F		
Phone	Fax		
Fmail			

5. Name of Contact Person Allyson Browne, SRECTrade, Inc.	
Mailing Address	-
201 California Street, Suite 630	
San Francisco, CA 94111	
Phone 877-466-4606 Fax 732-453-0065	_
Email applications@srectrade.com	
6. Name of REC/SREC Owner same as owner	
Mailing Address	
Phone Fax	
Email	
7. List all PJM-EIS GATS State Certification Numbers assigned to this facility:	-
	-
8. Operational Characteristics:	
Fuel Types Used (check all that apply):	
lacksquare Gas combustion from the anaerobic digestion of organic material	
☐ Geothermal	
☐ Ocean, wave or tidal actions, currents, or thermal differences	
☐ Qualified Biomass ⁱ	
☐ Qualified Fuel Cells ⁱⁱ	
☐ Qualified Hydroelectric ⁱⁱⁱ	
☐ Qualified Methane Gas captured from a landfill gas recovery system ^{iv}	

	☑ Solar
	☐ Wind
	If co-firing, provide the formula on file with PJM Environmental Information Services, Inc. (PJM-EIS)n/a
	Rated Capacity (in megawatts) 0.0084
	If multiple fuel types are utilized, attach the formula for computing the proportion of output per fuel type by megawatts per hour generated.
	Facility Final Approved Interconnection Date 1/5/16
	If co-firing with fossil fuels, co-fire start date_n/a
	If co-firing with fossil fuels, attach the allocation formula on file with PJM.
9.	. Is the Applicant's facility customer-sited generation ^v ? ☑ Yes □ No
	Is the Applicant's facility a community owned generating facility ^{vi} ? ☐ Yes ☑ No
	Can the output from the customer-sited generation be appropriately metered? ☑ Yes □ No

l, <u>Allyson Browne</u>	(print name) h	ereby certify under	penalty of perjury that
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- 1. I have made reasonable inquiry, and the information contained in this Application is true and correct to the best of my knowledge, information and belief.
- 2. I am authorized to submit and execute this Application and to bind myself and/or my company to the representations contained herein.
- I/my company agree(s) to comply with and be subject to the jurisdiction of the Public Service Commission of the State of Delaware for any matters arising out of my submission of this Application or the granting of the Application.
- 4. In the event that any of the information contained in this Application changes pending the consideration of this Application or after the Application is granted, I/my company will amend the Application to provide the Commission with such changed information.
- 5. I acknowledge that if any of the representations made in this Application or in any amendment thereto are found to be untrue when made, I/the company may be subject to sanctions, including but not limited to monetary fines and/or the revocation of any Certificate granted as a result of the representations made in this Application.

Signature:	allyson Browne
	0
Date:	03/02/2016

Required Documentation:

- If the facility is customer-sited generation, attach a copy of the utility's Final Approved Interconnection Agreement
- If the facility is a community-owned energy generating facility, attach a list of contact information (names, address, phone number, fax, and email) of all owners or customers who are sharing the output of the generator.
- One copy of U.S. Department of Energy, Energy Information Administration Form EIA-860, if rated capacity is >1.0 MW

ⁱ "Qualified Biomass" means electricity generated from the combustion of biomass that has been cultivated in a sustainable manner as determined by Delaware Department of Natural Resources and Environmental Control (DNREC), and is not combusted to produce energy in a waste to energy facility or in an incinerator.

"Qualified Fuel Cells" means electricity generated by a fuel cell powered by Renewable Fuels, as that term is defined in Section 1.0 of the Rules and Procedures to Implement the Renewable Energy Portfolio Standard, Delaware Public Service Commission Regulation Docket No. 56.

"" "Qualified Hydroelectric" means electricity generated by a hydroelectric facility that has a maximum design capacity of 30 megawatts or less from all generating units combined that meet appropriate environmental standards as determined by DNREC.

"" "Qualified Methane Gas" means electricity generated by the combustion of methane gas captured from a landfill gas recovery system; provided, however, that:

- Increased production of landfill gas from production facilities in operation prior to January 1, 2004 demonstrates a net reduction in total air emissions compared to flaring and leakage;
- 2. Increased utilization of landfill gas at electric generating facilities in operation prior to January 1, 2004 (i) is used to offset the consumption of coal, oil, or natural gas at those facilities, (ii) does not result in a reduction in the percentage of landfill gas in the facility's average annual fuel mix when calculated using fuel mix measurements for 12 out of any continuous 15 month period during which the electricity is generated, and (iii) causes no net increase in air emissions from the facility; and
- Facilities installed on or after January 1, 2004 meet or exceed 2004 Federal and State air emission standards, or the Federal and State air emission standards in place on the day the facilities are first put into operation, whichever is higher.

[&]quot;Customer-sited Generation" means a generating unit that is interconnected on the end use customer's side of the retail electricity meter in such a manner that it displaces all or part of the metered consumption of the end-use customer.

[&]quot;Community-owned Energy Generating Facility" means a renewable energy generating facility that has multiple owners or customers who share the output of the generator, which may be located either as a stand-alone facility or behind the meter of a participating owner or customer. The facility shall be interconnected to the distribution system and operated in parallel with an electric distribution company's transmission and distribution facilities.



DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection (Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW) (Final Agreement - must be completed after installation and prior to interconnection)

Certificate of Completion¹¹

INTERCONNECTION CUSTOMER CONTACT INFORMAT	HON
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Customer Name: Michael Beck Mailing Address: 30209 Mariners Lane			
City: Ocean View	State: DE	Zip Code: 19970	
Telephone (Daytime): 302-827-8270			
Fax Number:	E-Mail Addr	ess: mecbeckm@gmail.com	
FACILITY INFORMATION			
Facility Address: 30209 Mariners Lane			
City: Ocean View	State: DE	Zip Code: 19970	
		er #:	
Energy Source: Solar PV	₽	rime Mover: Photovoltaics	-
Inverter Type: Forced Commutate	ed Line Commutate	ed 🔳	
Number of Inverters: 1			
Inverter Manufacturer: Fronius	Model Numb	er(s) of Inverter: PRIMO 7.6	
AC In	verter Total ¹³ Rating <u>7</u>	eplate Rating: 8.4 (kW), 7.6 (kW), apacity 14: 7.6 (kW) 7600 (kVA)	
Generator (or PV Panel) Manufact	turer, Model # ¹⁵ : SolarW	orld 280 Black MONO	

Information entered here on Certificate of Completion (Part 2) must match part 1
 Sum of all generators or PV Panels
 Sum of all inverters
 This will be your system design capacity based upon your unique system variables.
 If more than one type, please list all manufactures and model numbers.



DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

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Certificate of Completion¹¹

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name:	Michael Beck			
Mailing Address:	30209 Mariners Lane			
City: Ocean View	State	e: <u>DE</u>	Zip Code: 19970	
Telephone (Daytir	ne): <u>302-827-8270</u>	_ (Evening): _		
Fax Number:		_ E-Mail Addre	ess: mecbeckm@gmail.com	
FACILITY INFOR				
Facility Address:	30209 Mariners Lane			
City: Ocean View	S	State: DE	Zip Code: <u>19970</u>	
DPL Account #: 55	500 1462 336	Mete	er #:	
Energy Source: S	olar PV	☑ Pr	rime Mover: Photovoltaics	*
Inverter Type: For	ced Commutated Lir	ne Commutate	ed ■	
Number of Invert	ers: 1			
Inverter Manufac	turer: Fronius	Model Number	er(s) of Inverter: PRIMO 7.0	5
Rating	AC Inverter To	otal ¹³ Rating <u>7</u>	eplate Rating: ^{8.4} (kW ^{7.6} (kW), apacity ¹⁴ : ^{7.6} (kW) ⁷⁶⁰	
Generator (or PV	Panel) Manufacturer, Mo	odel # ¹⁵ : SolarW	orld 280 Black MONO	

¹¹ Information entered here on Certificate of Completion (Part 2) must match part 1
12 Sum of all generators or PV Panels
13 Sum of all inverters

This will be your system design capacity based upon your unique system variables.

¹⁵ If more than one type, please list all manufactures and model numbers.

EQUIPMENT INSTALLATION CONTRA	CTOR Owner (Cus	tomer) Installed: Yes No
Contractor Name: Alutech United Inc		
Mailing Address: 117 Dixon St		
City: Selbyville	_ State: DE	Zip Code: 19975
Telephone (Daytime): 800-233-1144 Fax Number: 302-436-5100	_ (Evening): 302-841-9	059
Fax Number: 302-436-5100	E-Mail Address: der	ek@ecshutters.com
FINAL ELECTRIC INSPECTION AND IN	TERCONNECTION C	USTOMER SIGNATURE
		O TOMER GIONATORE
The Small Generator Facility is complete a having jurisdiction. A signed copy of the eattached. The Interconnection Customer a Generator Facility until receipt of the final a below.	electric inspector's for	m indicating final approval is
Signed: Muhaul F Buck (Signature of interconnection	n customer)	Date 12 18 2015
Printed Name: Michael Beck		
Check if copy of signed electric inspection	form is attached	
ACCEPTANCE AND FINAL APPROVAL F	OR INTERCONNEC	TION (for EDC use only)
The interconnection agreement is approved interconnected operation upon the signing a	and the Small General	rator Facility is approved for ificate of Completion by EDC:
Electric Distribution Company waives Witne If not waived, date of successful Witness Te	ss Test? (Initial) Yes	S (DCD) No () Passed: (Initial) ()
EDC Signature:	40.07 05'00'	Date: 1/5/16
Printed Name: Diana C. DeAngelis		
	i itle:	Regulatory Affairs Lead

First State Inspection Agency, Inc. 1001 Mattlind Way Milford, DE 19963

> 1-800-468-7338 302-422-3859

Alutech United, Inc. James Rodrigue PO Box 329 Selbyville, DE 19975

CERTIFICATE

Final Inspection Date:

12/16/2015

Application #:

018903

Owner:

Michael Beck

Customer Job #:

a .

Occupancy:

Solar

Location:

30209 Mariner's Lane, Ocean View, Sussex Co., DE

This certifies that the installation of electrical equipment listed on referenced application has been approved as meeting the requirements of the National Electric Code, utility, municipalities and Agency rules. Any modification, addition or alteration of the electrical system, after the date of final inspection, will require a new application for inspections and certifications.

Chief Electrical Inspector

Documentation Required for Delaware Labor/Workforce Bonus

- 11. If the Applicant's installation is solar or wind sited in Delaware:
 - a. Was the facility physically constructed or installed with a workforce that consists of at least 75% Delaware residents?

If you answered yes to "a." above, complete the following as evidence.

The following individuals (list every employee) were employed by

Alutech United DBA Green Street Solar **Installation Company Name**

as direct labor (physical construction and installation) for this facility: (Attach additional sheets if necessary)

Please complete the following information for all individuals listed above:

Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits only)
N/A		
		
Total Delaware Resident Em	ployees: 20 Total No	umber of Employees:

% of Delaware Residents (Delaware Residents Divided by Total Employees):

50% of the cost of the renewable components, manufactured in De	e energy equipment, inclusive of mounting elaware?
☐ Yes*	
Alutech United	Shell Luly R
Company Name of Installer	Signature of Company Representative
117 Dixon Street	Shelly Culver
Address Selbyville, DE 19975 Address	Print Name of Co. Representative
facility identified o If the supplier's invoice show the company's matching PO used/installed, must also be o If using a master invoice, a re	ving Delaware manufactured equipment with this vs only a coded Purchase Order (PO) number, a copy of that includes the address where the materials were
11. If the Applicant's installation is s	olar or wind sited in Delaware:
 a. Was the facility physically c consists of at least 75% Delagon Yes* 	onstructed or installed with a workforce that aware residents?
b. Does the installing company who are Delaware residents	y employ, in total, a minimum of 75% workers s?
☐ Yes* ☐ No	
Alutech United	Sh. W. Sulusz
Company Name of Installer	Signature of Company Representative
117 Dixon Street	Shelly Culver
Address Selbyville, DE 19975 Address	Print Name of Co. Representative

10. If the Applicant's installation is solar or wind sited in Delaware, is a minimum of

^{*}If Yes, please attach supporting documentation (see pages 7-8 for details). Please note, in order to qualify for the Labor/Workforce Bonus, at least one of the options (a. or b.) must be met.

Documentation Required for Delaware Labor/Workforce Bonus

- 11. If the Applicant's installation is solar or wind sited in Delaware:
 - b. Does the installing company employ, in total, a minimum of 75% of workers who are Delaware residents?

Delaware residents?		
If you answered yes to "b." above, co	omplete the following as evidence	:
Alut	ech United DBA Green Street	Solar
	Installation Company Name	
employed the following individuals (I project start date until project complinterconnection approval to operate	etion date). Projects are consider (Attach additional sheets if neces	red complete upon final ssary)
Project Start Date: 12/14/2	015 Project Complete Date:	115/14
Employee Full Name	Home Address (As per Tax Withholding)	Social Security Number (Last 4 digits Only)
N/A		
Total Delaware Resident Employees:	Total Number	of Employees: <u>30</u>
% of Delaware Residents (Delaware Res		1 - 74

	NAME	STREET ADDRESS	CITY	ST	ZIP	SS#
1	Aaron Woods	22763 Coverdale Road	Seaford	DE	19973	25
2	Adam Ash	36096 Zion Church Road	Frankford	DE	19945	24
3_	Alfred Bangert	17905 Careys Camp Road	Laurel	DE	19956	33
4	Antione Johnson	27542 Holly Hock Lane	Seaford	DE	19973	29
5	Cody Perry	112 East Tingle Drive	Selbyville	DE	19975	75
6	Daniel Fleetwood, III	36157 Millers Neck Road	Frankford	DE	19945	68
7_	David Linehan	26393 Sea Mist Court	Millsboro	DE	19966	85
8	Derek Dykes	31866 Mountain Laurel Ridge	Laurel	DE	19956	74
9	Donnie Baker	35359 Danny Drive	Laurel	DE	19956	60
10	Dustin Brittingham	2 Leah Street	Georgetown	DE	19947	01
11_	George Carey	36966 Deer Drive	Selbyville	DE	19975	69
12	George Pfaller	24501 Cedar Lane	Georgetown	DE	19947	48
13	James Webb	629 Gun and Rod Club Road	Harrington	DE	19952	63
14	Jason Killen	16502 Old Furnace Road	Georgetown	DE	19947	18
15	Jason Roth	36851 Old Mill Bridge Road	Selbyville	DE	19975	90
16	Jose Cordoba	Lazy Lagoon Lot 41	Frankford	DE	19945	42
17	Michael Haymond	12640 Beach Hwy.	Greenwood	DE	19950	01
18	Richard Jalot, 2nd	18546 Sand Hill Rd.	Georgetown	DE	19947	22
19	W. Jeffrey Timmons	11127 Signature Blvd.	Selbyville	DE	19975	52
20	William Warden	26163 Kelly Circle	Seaford	DE	19973	89
21	Brian Reed, Jr.	233 Briarwood Circle	Denton	MD	21629	00
22	Erik Diaz-Padilla	105 Caroline St., Unit 6	Ocean City	MD	21842	15
23	John Basch	1504 Sharen Drive, Apt. F	Salisbury	MD	21801	96
24	Kyle Handy	106 Meadow Drive, Unit 208	Easton	MD	21601	00
25	Lisa Bloom	403 143 rd Street, Unit 5	Ocean City	MD	21842	74
26	Mark Caldwell	1004 Philadelphia Avenue, Unit 5	Ocean City	MD	21842	20
27	Richie Wright	5637 Caledonia Drive	Salisbury	MD	21801	40
28	Russell Pfaller	7167 Chatham Manor Way	Pittsville	MD	21850	98
29	Shelly Culver	1010 Marley Manor Drive, #101	Salisbury	MD	21804	59
30	Tyler Burr	403 143 rd Street, Unit 5	Ocean City	MD	21842	69